

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Novo Nordisk PAC

ADDRESS (number and street)

500 New Jersey Avenue NW

Suite 350

☐Check if different
than previously
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00424838

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

☐☐☐in the
State of☐(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

05

01

2008

through

05

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Mawby

Signature of Treasurer

Electronically Filed by Michael Mawby

Date

07

10

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		5097.50
(b) Cash on Hand at Beginning of Reporting Period	7779.74	
(c) Total Receipts (from Line 19)	6854.00	27354.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14633.74	32451.50
7. Total Disbursements (from Line 31)	7030.00	24847.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7603.74	7603.74
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Novo Nordisk PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5140.00	13700.00
(i) Itemized (use Schedule A)	1714.00	13654.00
(ii) Unitemized	6854.00	27354.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	6854.00	27354.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6854.00	27354.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6854.00	27354.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	30.00	150.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	30.00	150.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	24697.76
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7030.00	24847.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7030.00	24847.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	6854.00	27354.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6854.00	27354.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30.00	150.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30.00	150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-2-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-2-9-49

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-2-12-22

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: 20080612-3-10-48

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: 20080612-4-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	8

Transaction ID: 20080617-4-9-49

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-4-12-22

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-5-10-48

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-6-9-49

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-6-12-22

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-7-10-48

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-7-9-49

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-7-12-22

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-8-10-48

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Anne P. Cannon

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Scientific Liason

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-9-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 685 Highway Route 1 S

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-10-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-11-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-12-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	8

Transaction ID: 20080617-12-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	8

Transaction ID: 20080523-12-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: 20080612-13-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-13-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-13-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-14-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

John E. Davis

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-16-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kim B. Elston

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-17-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-18-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-19-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-19-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-20-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-21-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-22-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert D. Gawlikowski

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-23-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-24-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-26-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Sharon J. Haggerty

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-27-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-28-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-28-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-29-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-29-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-29-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-30-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-30-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-30-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-31-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-32-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-32-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-33-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Todd D. Hughes

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-34-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Todd D. Hughes

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-34-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Todd D. Hughes

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-35-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-35-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-35-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-36-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-36-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-36-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-37-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-37-9-49

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-37-12-22

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-38-10-48

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-38-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-38-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-39-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-40-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-40-9-49

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-40-12-22

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-41-10-48

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Howard Levy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-43-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Charles J. Maerzke

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-44-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-44-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-44-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-45-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-45-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-45-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-46-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	8

Transaction ID: 20080617-48-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	0	8

Transaction ID: 20080523-48-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	8

Transaction ID: 20080612-49-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher N. McGowen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-50-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-50-9-49

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-50-12-22

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-51-10-48

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-52-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-52-9-49

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-52-12-22

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-53-10-48

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Scientific Liason

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-54-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-55-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-55-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-56-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Dylan M. Pensabene

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-58-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-59-9-49

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-59-12-22

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-60-10-48

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-60-9-49

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-60-12-22

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-61-10-48

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-62-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-63-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-64-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-64-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-65-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane E. Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-64-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-65-9-49

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-65-12-22

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-66-10-48

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-66-9-49

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-66-12-22

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-67-10-48

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-67-9-49

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-67-12-22

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-68-10-48

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-73-9-49

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-73-12-22

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-74-10-48

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Michael Vargas

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-75-10-48

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Dana G. Vaughns

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-76-10-48

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-76-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-76-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-77-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	8

Transaction ID: 20080617-78-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	8

Transaction ID: 20080523-78-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: 20080612-79-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-79-9-49

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-79-12-22

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-80-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 53

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	8

Transaction ID: 20080617-80-9-49

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	8

Transaction ID: 20080523-80-12-22

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	8

Transaction ID: 20080612-81-10-48

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-83-10-48

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: 20080617-81-9-49

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 8

Transaction ID: 20080523-81-12-22

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: 20080612-82-10-48

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

5140.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 / 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Boyd for Congress	Transaction ID: 81688-5307123064994 Date of Disbursement																				
Mailing Address PO Box 15703	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		3	0		2	0	0	8												
City Tallahassee State FL Zip Code 32317	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name F. Allen Boyd, Jr.	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/Type</td> </tr> </table>	011	Category/Type																		
011																					
Category/Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Diana Degette for Congress Inc.	Transaction ID: 81688-5277215838432 Date of Disbursement																				
Mailing Address PO Box 61337	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		3	0		2	0	0	8												
City Denver State CO Zip Code 80206	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Diana L. DeGette	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/Type</td> </tr> </table>	011	Category/Type																		
011																					
Category/Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Don Payne for Congress	Transaction ID: 81688-0736657977104 Date of Disbursement																				
Mailing Address PO Box 2406	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		3	0		2	0	0	8												
City Newark State NJ Zip Code 07114	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Donald M. Payne	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/Type</td> </tr> </table>	011	Category/Type																		
011																					
Category/Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Elizabeth Dole Committee Inc Mailing Address PO Box 2918	Transaction ID: 81688-3299676775932 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Raleigh State NC Zip Code 27602 Purpose of Disbursement Contribution Candidate Name Elizabeth Dole Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:	Amount of Each Disbursement this Period <div>2000.00</div> <div>011</div> Category/Type
B. Full Name (Last, First, Middle Initial) Kind for Congress Committee Mailing Address 205 South 5th Ave Suite 428 City La Crosse State WI Zip Code 54601 Purpose of Disbursement Contribution Candidate Name Ron Kind Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 03	Transaction ID: 81688-5103418231010 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type
C. Full Name (Last, First, Middle Initial) People for Patty Murray U S Senate Campaign Mailing Address PO Box 3662 City Seattle State WA Zip Code 98124 Purpose of Disbursement Contribution Candidate Name Patty Murray Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District:	Transaction ID: 81688-0275689959526 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type
SUBTOTAL of Disbursements This Page (optional) ▶	<div>4000.00</div>
TOTAL This Period (last page this line number only) ▶	<div>7000.00</div>

Image# 28991408449

Form/Schedule: **F3X**

Transaction ID:

Amendment is filed to clarify the occupation information previously provided.
